

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. PPC-10202/08																																					
Application No. 10/767,828 Conf.#5600		Filing Date January 29, 2004		Examiner T. Trieu																																					
Applicant(s): Edward H. Phillips																																									
Invention: GEROTOR PUMP																																									
<b>TO THE COMMISSIONER FOR PATENTS</b>																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
<b>CLAIMS AS AMENDED</b>																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th colspan="3" style="width: 50%;">Rate</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>6</td> <td>- 20 = 0</td> <td>x 50.00</td> <td colspan="2">0.00</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>- 3 = 1</td> <td>x 200.00</td> <td colspan="2">200.00</td> </tr> <tr> <td colspan="3">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td colspan="3"></td> </tr> <tr> <td colspan="3">Other fee (please specify):</td> <td colspan="3"></td> </tr> <tr> <td colspan="3"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b></td> <td colspan="3">200.00</td> </tr> </tbody> </table>						Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			Total Claims	6	- 20 = 0	x 50.00	0.00		Independent Claims	4	- 3 = 1	x 200.00	200.00		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>			200.00		
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<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																									
<input type="checkbox"/> No additional fee is required for this amendment.																																									
<input type="checkbox"/> Please charge Deposit Account No. <u>07-1180</u> in the amount of \$ _____ . A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																									
<input checked="" type="checkbox"/> Payment by credit card.																																									
<input type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-1180</u> as described below. A duplicate copy of this sheet is enclosed.																																									
<input checked="" type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
/Thomas E. Anderson/ Thomas E. Anderson Attorney/Agent Reg. No.: 31,318																																									
Dated: <u>September 15, 2006</u>																																									
GIFFORD, KRASS, GROH, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Suite 330 Post Office Box 7021 Troy, Michigan 48007-7021 (248) 647-6000																																									